MARINE MAMMAL STRANDING REPORT _____ NMFS REGISTRATION #: _____(NMFS USE) SID#___(NMFS USE) _____ GENUS: _____ SPECIES: _____ COMMON NAME: _____ FXAMINER Affiliation: ______ Phone: _____ Name: ___ Address: Letterholder: LOCATION OCCURRENCE DETAILS MS# (NMFS USE) State: ____ County: __ Mass Stranding: G YES G NO # Animals: _____ City: Human Interaction: G YES G NO G CBD Locality Details: Check one -G 1. Boat Collision G 2. Shot G 3. Fishery Interaction G 4. Other Floating? G YES G NO G External Exam G Internal Exam G Not Examined How determined: Latitude: _____ ° ____ ' Longitude: _____ ° ____ ' Other Causes (if known): DATE OF INITIAL OBSERVATION DATE OF EXAMINATION (LEVEL-A) Year: _____ Month: ____ Day: ____ Year: _____ Month: ____ Day: ____ CONDITION: Check one -G 1. Alive CONDITION: Check one -G 1. Alive G 2. Fresh dead G 2. Fresh dead G 3. Moderate decomposition **G** 3. Moderate decomposition G 4. Advanced decomposition G 4. Advanced decomposition **G** 5. Mummified/Skeletal G 5. Mummified/Skeletal **G** Unknown **G** Unknown LIVE ANIMAL DISPOSITION **CARCASS DISPOSITION** Check one -G 1. Left at site Check one or more -G 1. Left/Released at site G 2. Buried G 2. Relocated G 3. Towed G 3. Transferred into Rehabilitation G 4. Scientific collection G 4. Died G 5. Educational collection G 5. Euthanized G 6. Other _____ G 6. Released G 7. Retained G Unknown G Unknown Date: _____ CONDITION: G Sick G Injured Date: ____ NECROPSIED? G YES G NO Treatment Facility: ___ Necropsied by: ___ TAG DATA MORPHOLOGICAL DATA Tag # Color Type * Placement Applied Present SFX: G 1. Male (Circle one) Check one -G 2. Female D LF LR G G?. Unknown RF RR Straight Length: _____ G cm G in G approx. Weight: D LF LR G G kg G lb G estimate RF RR D LF LR G PHOTOS TAKEN? G YES G NO Disposition: RF RR VIDEO TAKEN? G YES G NO Disposition: _____ * D=Dorsal; LF=Left Front; LR=Left Rear; RF=Right Front; RR=Right Rear REMARKS:

DISPOSITION OF TISSUE/SKELETAL MATERIALS:____